

USE THIS FORM FOR CRAFTS

THE CLEVELAND MUSEUM OF ART
 FIFTIETH ANNUAL EXHIBITION OF WORK BY ARTISTS AND CRAFTSMEN OF THE WESTERN RESERVE
 MAY 1 to JUNE 16, 1968

PLEASE
 LETTER
 PLAINLY
 OR TYPE

Collaborator _____

MISS
 MRS.
 MR.

Artist _____

J. CHARLES WALKER
 FIRST NAME

LAST NAME

Permanent Address _____

1520 SOUTH BLVD. KENT, OHIO 44240
 STREET CITY ZIP

COUNTY

Tel. 673-0699

Student Temporary Address _____

STREET

CITY

ZIP

COUNTY

Collect return shipment desired. YES NO

Return address SAME

Please bring Registration Fee of \$2.00 (Cash or Check) with your entries.

CLASS 5 MEDIUM STERLING SILVER	CLASS 5 MEDIUM STERLING SILVER + GOLD	CLASS 5 MEDIUM STERLING SILVER + JADE
TITLE BRACELET	TITLE KINETIC RING	TITLE TWO FINGER RING (SMALL +)
DESCRIPTION & DIMENSIONS 3" X 3" X 2" PLATE SQUARES WITH CIRCULAR CUTS	DESCRIPTION & DIMENSIONS 1" X 1" X 1" GOLD MOVING SPHERE 1) STERLING MOUNT	DESCRIPTION & DIMENSIONS 2" X 3" X 1" RECTANGULAR JADE 1 STONE IN STERLING MOUNT
NUMBER FOR SALE 1	NUMBER IN EDITION (GRAPHIC PRTS.)	NUMBER IN EDITION (GRAPHIC PRTS.)
PRICE \$1350.00	PRICE \$1300.00	PRICE \$250.00
Artist J. CHARLES WALKER FIRST NAME LAST NAME	Artist J. CHARLES WALKER FIRST NAME LAST NAME	Artist J. CHARLES WALKER FIRST NAME LAST NAME
2437	2438	2439
ACCEPTED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	ACCEPTED <input checked="" type="checkbox"/> REJECTED <input type="checkbox"/>	ACCEPTED <input type="checkbox"/> REJECTED <input checked="" type="checkbox"/>
DO NOT WRITE IN THIS SECTION		
DO NOT WRITE IN THIS SECTION		
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This entry blank must be fully made out (typewritten or plainly lettered for catalog purposes) and signed. Unsigned entry blanks will not be accepted.

Note calendar for delivery and return of objects carefully. It is understood that the Museum will have the right to dispose for its own account any entry not called for by July 25, 1968.

It is also understood that accepted entries will remain on exhibition until June 16 1968.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

CHARLES WALKER
SIGNATURE

RETURN DATES FOR OBJECTS - Monday through Saturday 9 a.m. - 4:45 p.m. at Museum Service Entrance

Born in Cleveland YES NOEntered Previous May Shows? YES NO

J. CHARLES WALKER

FIRST NAME LAST NAME

COUNTY

Tel. 673-0699

SUBMIT ENTRIES WITH ENTRY BLANK AND
 FEE MARCH 9 THROUGH MARCH 16, 1968

S.T.T. 5-8-68

Submit one entry blank in triplicate per person. One copy, complete with juror's marks, will be returned to you as notification of acceptance or rejection. THIS COPY IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This form in triplicate is made up of N C R paper which does not require carbon.

REJECTED: May 6 - May 11

ACCEPTED: June 24 - June 29

64 LF